

lowa Department of Public Health Promoting and Protecting the Health of Iowans

Substance Abuse Data Quality Assurance/Quality Improvement – SFY 2013 Updates and Guidance

Data Entry Deadline Change: Effective July 1, 2012, cut off dates for providers to report their monthly data will be the Sunday before the 2nd Monday of each month. IDPH Data Integrity reports will be sent to providers by the Friday after the 2nd Monday of each month. For fiscal year reporting, 8/31 is the last day that data can be submitted for the previous fiscal year and be captured in Magellan and IDPH reporting for the fiscal year.

IDPH Data Integrity Report (All Providers)		
Record Type	Comments	
Admits with No Encounters past 60 Days		
Admits with No Encounters	No Changes to these monthly reports to providers.	
Placement Screenings with No Encounters	Provider response to the QA concerns identified for the previous month is to be completed by the Sunday before the 2 nd Monday of each month.	
CDR Validation Concerns		
TEDS Errors		

New Quarterly Reports		
Report Name	Description	
Data Entry Errors TA can be provided to help providers create this report more frequently.	A new report for FY2013 that will be sent out quarterly to providers. This report will list possible ACTIVITY DATE data entry errors. For example, entering 1/1/11, instead of 1/1/12.	
Data Lag Report ISMART Users can create this report – TA to be provided	A new informational report will show the lag between the activity date and create date for Admission records (Crisis, Placement Screening, Admission), Encounters, and Discharges where the difference between the activity date and create date is: • <10 days • <28 days • >29 days IDPH will provide this initial report for SFY 2012 and provide a template for ISMART users to create and track this information.	
Missing Client Data	A new report for FY 2013 that will identify for providers client data sets for which the CDR has incomplete or partial data.	



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New Quarterly Reports	
Report Name	Description
Unfinished Client Activities • ISMART Users can create this report – TA to be provided	A new report for FY2013 that will be sent out quarterly. ISMART users can access this report in ISMART (Under QA/QI Reports –Unfinished Client Activities). IDPH will send this report for SFY2012 to providers that have unfinished client activity.

ISMART/Central Data Repository Guidance		
Торіс	Comments	
 Admission records created by error and cannot be deleted. 	 Guidelines for fixing Admission records created in error: On the Admission record, enter "No Tx Recommended" in both the Recommended and Actual Environment fields Enter an Encounter with an Event Type of "Admission" and a Service of "NBL" with "No Charge" as Primary Pay Source and Other Pay Source. Programs using full clinical system can enter a note indicating the error made. All required fields must be filled in. Duration and Session # are to equal "0". Complete a Discharge record using "Other" as the Discharge Reason. Program may type in "Error" in the field next to "Other". All required fields must be filled in and the Discharge Record saved. Close the episode and case. 	
 Crisis Intervention/Stabilization See attached "Crisis Intervention/Stabilization Guidance" PDF for additional guidance. 	 Definition: The delivery of services to non-admitted individuals who present, often on an unscheduled basis, with significant urgent issues requiring coordination and support provided by clinical staff. 	
Days Waiting (how to calculate)	 Enter number of calendar days the client waited for services as indicated below: For Placement/Screening – Enter number of calendar days between the client's Date of First Contact and Placement Screening Date. (Example: If Date of First Contact is 4/1/12 and the client is seen for Placement Screening on 4/12/12, then the Days Waiting would equal 11 days) For Admission - Enter number of calendar days between the client's Placement Screening Date and Admission Date. (Example: If Date of Placement Screening is 4/12/12 and the client is seen Admission on 4/15/12, then the Days Waiting for admission would equal 3 days). 	



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ISMART/Central Data Repository Guidance		
Торіс	Comments	
Discharge (date)	For CDR data reporting purposes: • DISCHARGE DATE = LAST DATE OF CONTACT	
	For ISMART users only: ISMART auto populates Discharge with the Program Enrollment Closure Date and auto populates Date of Last Contact with the date of the last encounter entered.	
	 When the discharge module is completed and ready to be saved, make sure the following fields are the same date (Date of Last Contact): Program Enrollment Closure Date = DISCHARGE = DATE OF LAST CONTACT 	
Encounters created by error and cannot be deleted	Guidelines for fixing Encounters created in error: • Change Service to "NBL" with "No Charge" as Primary Pay Source and Other Pay Source. Duration and Sessions are to equal "0". All required fields must be filled in. Programs using full clinical system can enter a note indicating the error made.	
IV Drug User and Pregnant Women (Wait Times)	Page 49 of The Iowa Plan for Behavioral Health RFP for IDPH Funded Substance Abuse Services – July 2009 contains the following reference regarding IVDU's and Pregnant women and access to services: 2. Special Service Needs	
	• clients who are pregnant women in need of routine services must be admitted within 48 hours of seeking treatment	
	 clients who are intravenous (IV) drug users must be admitted not later than 14 days after making the request for admission, or 120 days after the date of such request if no program has the capacity to admit the individual on the date of such request and if interim services are made available to the individual not later than 48 hours after such request. 	
NBL Code use in ISMART Service Encounters	NBL codes can be used by ISMART users to "zero" out encounters that are errors (ISMART does not allow encounters to be deleted). Users are asked to enter "0" in all numeric fields. Select "No Charge" as Primary Pay Source and Other Pay Source	
	If programs use the "NBL" code to track non-billable services for productivity purposes, this can be done, however the Session # must = "0". Select "No Charge" as Primary Pay Source and Other Pay Source.	



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ISMART/Central Data Repository Guidance		
Topic	Comments	
Placement Screening records created by error	 Guidelines for fixing Placement Screening records created in error: On the Placement Screening record, enter "No Tx Recommended" in both the Recommended and Actual Environment fields Enter an Encounter with an Event Type of "Placement Screening/OWI" and a Service of "NBL" with "No Charge" as Primary Pay Source and Other Pay Source. Duration and Session # are to equal "0". All required fields must be filled in. Programs using full clinical system can enter a note indicating the error made. Close the episode and case 	

IDPH Data Integrity Reports Webinar/Training: To be announced. An updated ISMART/CDR Data Entry Guide will be available September 2012.